one to regulate Paramedical discipline and another to regulate Physiotherapy discipline.

TB prevention measures

3435. SHRI S. ANBALAGAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Tuberculosis remains one of the serious public health problem in the country;

(b) if so, the number of persons died of this disease during the last three years, year-wise;

(c) the number of persons presently effected by this disease;

(d) whether Government have taken any steps for the treatment of the patients;

(e) whether Government propose to take any steps for total elimination of this dreaded disease on the lines of successful polo vaccine campaign; and

(f) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sit

(b) State-wise detail of deaths reported during the last 3 years under Revised National TB Control Programme (RNTCP), due to TB among patients registered for treatment is given at Statement-I (See below).

(c) It is estimated that every year, about 18 lakh new cases are occurring in the country of which approximately 8 lakhs are new smear positive and, therefore, highly infectious.

A Statement-ll indicating State-wise details of patients detected and put on treatment under the Programme during the year 2004 is enclosed.

(d) To control the problem of TB, Revised National TB Control Programme (RNTCP) is being implemented in the country since year 1997 in a phased manner. Under the Programme, Drugs are provided under observation and patients are monitored so that they complete their treatment. Drugs are provided free of cost in patient-wise boxes. Presently, about 1067 million

population in more than 607 districts/reporting units has been covered under the revised strategy. It is envisaged to cover the entire country under the Revised Strategy during the current financial year.

(e) and (f) Consequent upon implementation of the RNTCP in the country, the treatment success rate of the New sputum positive cases is consistently above 85% and the death rate has reduced from 29% to around 4% but due to different epidemiological situation pertaining to both T.B. and Polio, it is technically not possible to plan for elimination of TB disease at this point of time on the lines of Polio.

Statement-I

State-wise details of deaths reported during the last three years

State	Year		
	2002	2003	2004 (upto Sept.,)
1	2	3	4
Andhra Pradesh	1465	4344	2966
Arunachal Pradesh	16	57	31
Assam	52	376	656
Bihar	158	194	222
Chandigarh	24	43	29
Chhattisgarh	144	366	466
Delhi	437	493	378
Goa	—	—	2
Gujarat	1788	2058	1398
Haryana	188	348	1016
Himachal Pradesh	361	433	258
Jammu and Kashmir	—	—	23
Jharkhand	81	177	244

1	2	3	4
Karnataka	1096	2429	1893
Kerala	861	894	568
Madhya Pradesh	258	1158	1219
Maharashtra	3449	4971	3471
Manipur	156	148	76
Meghalaya	—	33	75
Mizoram	—	66	58
Nagaland	4	54	33
Orissa	812	1116	1177
Pondicherry	—	—	21
Punjab	48	511	373
Rajasthan	2151	2275	1481
Sikkim	28	26	28
Tripura	—	—	17
Tamil Nadu	3035	3335	2231
Uttaranchal	1	54	140
Uttar Pradesh	663	2500	2228
West Bengal	2533	2996	2109
TOTAL :	19809	31455	24887

- As treatment outcome (death, success rate etc.) becomes available only after one year from initiation of the treatment, the information in regard to TB deaths is available only upto 2003.
- The coverage of population under RNTCP has increased from year to year. This resulted in increased number of TB cases detected and put on treatment under the DOTS strategy. Hence, seemingly

more number of TB deaths reported under RNTCP in the sccessive years although the proportion of deaths over the years is more or less the same as is evident from the table given below:

Year	Population under RNTCP	No. of TB cases detected and put on treatment	TB deaths	%age
2002	530 million	622873	19809	3.18
2003	775 million	906472	31455	3.47
2004	947 million	1187353	24887	*

* Deaths available only upto September, 2004 for the patients put on treatment during the year 2004.

Statement-ll

Statement indicating State-wise detail of TB cases detected and put on treatment under the Programme during the year 2004.

Sl. No.	State	2004
1	2	3
1.	A&N Islands	595
2.	Andhra Pradesh	109365
3.	Arunachal Pradesh	2057
4.	Assam	28551
5.	Bihar	24422
6.	Chandigarh	2208
7.	Chhattisgarh	23822
8.	D&N Haveli	0
9.	Daman & Diu	0
10.	Delhi	43809

1 2	3
11. Goa	509
12. Gujarat	80626
13. Haryana	33606
14. Himachal Pradesh	13458
15. Jammu and Kashmir	6089
16. Jharkhand	20031
17. Karnataka	65403
18. Kerala	25439
19. Lakshadweep	—
20. Madhya Pradesh	68260
21. Maharashtra	143766
22. Manipur	5042
23. Meghalaya	3800
24. Mizoram	2035
25. Nagaland	2707
26. Orissa	43238
27. Pondicherry	1203
28. Punjab	23304
29. Rajasthan	105596
30. Sikkim	1724
31. Tamil Nadu	96639
32. Tripura	924
33. Uttar Pradesh	164406

1	2	3
34.	Uttaranchal	10872
35.	West Bengal	104026
	TOTAL :	1257532

Primary Health Centres in Arunachal Pradesh

3436. SHRI NABAM REBIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have any proposal to improve the functioning of Primary Health Centres in the rural areas of Arunachal Pradesh; and

(b) if so, the details of schemes being implemented in the State?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir. Under National Rural Health Mission(NRHM), it is proposed to upgrade 100% Primary Health Centres (PHCs), phase-wise in the States/UTs including Arunachal Pradesh for 24 hours referral service and also provision of 2nd doctor at PHC level, including AYUSH would be undertaken on the basis of felt need. Also, PHCs would be upgraded to Indian Public Standards (IPHS).

(b) Various health schemes are being implemented in the country, including rural areas of Arunacal Pradesh. They are-Sub-centre Scheme, Area Projects, Strengthening of Basic Training School, Free Distribution of Contraceptive, State Health System Development Projects, Major/Minor Civil Works under Reproductive and Child Health Programme, National Malaria Control Programme, National T.B. Control Programme, National Leprosy Eradication Programme, National Aids Control Programme, National Programme for Blindness Control etc. Also the State has entered into partnerships with leading NGOs to run some of the Primary Health Centres.